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Signs and Symptoms of Diabetes ...

- Frequent urination
- Excessive thirst
- Increased hunger
- Weight loss
- Tiredness
- Blurred vision
- Frequent infections
- Lack of interest and concentration
- A tingling sensation or numbness in the hands or feet
- Slow-healing wounds
- Vomiting and stomach pain (often mistaken as flu)

World Diabetes Day

14 November

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Editorial

WORLD DIABETES DAY

World Diabetes Day is the primary global awareness campaign of the diabetes world and is held on November 14 each year. November 14th is a significant date in the diabetes calendar because it marks the birthday of the man who co-discovered insulin, Frederick Banting. Banting discovered insulin in 1922, alongside Charles Best. Each year, World Diabetes Day is centered on a theme related to diabetes. Topics covered have included diabetes and human rights, diabetes and lifestyle, diabetes and obesity, diabetes in the disadvantaged and the vulnerable, diabetes in children and adolescents.

Diabetes is the common name for a range of conditions including diabetes mellitus type one and diabetes mellitus type two, diabetes insipidus and gestational diabetes. These are all conditions, which affect how the pancreas secretes insulin or how the body reacts to this hormone. Depending on the type and severity, diabetes is controlled by dietary measures, weight loss, oral medication or injected or inhaled insulin. There is a wide range of short and long-term complications of diabetes including foot, eye problems and vascular diseases.

The activities conducted by institutions and organizations are advocating and raising awareness, disseminating knowledge and information, encouraging innovation and identifying barriers, advancing multisectoral action, advocating for mobilization of resources.

Molly Sam, *Editor*

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REFLEXOLOGY

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Good health is a basic need for a person. Without good to health a person will not feel good or enjoy life.

Osteoarthritis mostly often affects middle-aged and older people, involving the neck, lower back, knees, hips and fingers. It is the major cause of morbidity and disability in the elderly. Epidemiological radiographic assessment studies shows that 80% of male and female population will be affected. Women are generally affected at a younger age than men.

Patients with Osteoarthritis experience pain and loss of function especially in early morning almost for 30 minutes. The basic activities of everyday life, such as walking, running, house work, and the ability to exercise are impacted greatly for many Osteoarthritis sufferers. 72% respondents report being limited in doing everyday or routine things.

Reflexology is a Healing Art. Like all art forms there is a connection: "Reflexology Giver becomes one with the Reflexology Receiver". There are certain reflex points in the feet and hands that are straightway connected to the body. The therapist uses his hands to apply pressure on reflex points. By working on these reflex points, a therapist can release blockages in the body and restore balance and increase energy flow. The creative movement of fingers applied to reflex pressure points on the feet will relieve pain and stress in the body. Through regular reflexology treatments the body will be able to heal by itself restore, re-balance and relax the body and mind to bring about good health. The ultimate purpose of the therapy is to promote wellness.

Need For The Study

Global statistics reveals over 100 million people worldwide suffers from osteoarthritis. As per World health Organization Osteoarthritis is the fourth leading cause of death. Up to 40% people over 70 years of age suffers by Osteoarthritis of the knee. Almost 80% of patients with osteoarthritis have some degree of limitation of movement and 25% cannot perform their major daily activities of life.

Overall studies conducted in different parts of the world reported prevalence rates of chronic pain ranging from 12% to 80%.The prevalence was greater in developing countries and lower, but still problematically high in more developed countries. The life time prevalence of pain among senior citizen was estimated between 59 percent to 90 percent, more women than men reported temporary and persistent pain. The data from India shows that an estimated number of annual knee joint pain visits to a physician in the hospitals is 4 million. In U.S. the prevalence of knee pain was found in 11.2% of the sample.

There are many treatments offered to reduce knee joint pain. Among them reflexology is the present trend which is most sought after reflexology promotes healing by stimulating the nerves in the body and encouraging the flow of blood. In the process, reflexology not only quells the sensation of pain, but relieves the source of the pain as well. In a study to investigate the effectiveness of reflexology in the management of low back pain (LBP). Results indicated that reflexology had positive effect in 70 percentage of the subject.

In another study 3 female patients, ages 37, 50 and 62, with acute and chronic stages of knee pain and were given 7 sessions of foot reflexology for one hour every other day. They were relieved of knee pain and joint swelling disappeared after 2-4 courses. It was found that foot reflexology can improve blood and lymphatic circulation, strengthen immune function, reduce ischemia and hypoxia of arthropathic limbs but should be used with caution or avoided in cases of uncontrolled acute inflammation. Foot reflexology was found to be effective for the relief of symptoms associated with knee pain and joint swelling.

Reflex point stimulation helps in reducing various types of pain, it is cost effective, there is no need for assistance, requires no special equipment, does not interfere with patients privacy and also reduces the use of drugs for acute pain. Based on the evidence of the theories and effectiveness of reflexology and a personal interest in the subject matter, the investigator wishes to evaluate the effectiveness of reflexology on pain among Osteoarthritis patients.

Statement of the Problem

A Study to Assess the Effectiveness of Reflexology on Pain among Osteoarthritis Patients in Selected Hospitals at Nellore.

Objectives of the Study

- To assess the level of pain among osteoarthritis patients in both Experimental and Control group before and after the intervention.
- To determine the effectiveness of reflexology on pain among osteoarthritis patients, compare the level of pain between the experimental and control group before and after the intervention.
- To find out the association of the level of pain with selected baseline variables in both Experimental and Control group.

Osteoarthritis – joint pain booked and attending OPD or admitted in in-patient units at selected hospital, Nellore.

Assumptions

1. Pain is a subjective feeling, every individuals expression of pain may varies based on their different Pain tolerance level. 2. Osteoarthritis patients experience joint pain. 3. Reflexology may have some effects on pain.

Delimitations

The study will be limited to Osteoarthritis patients: 1. Age group between 35-55 years. 2. Those who willing to participate in this study. 3. Patients attending regularly to the OPD in selected hospitals at Nellore.

Materials and Methods

Source of Data: Data will be collected from Osteoarthritis patients; those are attending regularly to the OPD in selected hospitals, at Nellore. **Method of Data Collection. Research Approach:** Quantitative Approach. **Research Design:** Quasi Experimental Non Randomized Control group Design. **Setting:** The Study will be conducted in OPD of selected Hospitals, in Nellore. **Population:** The Population will be osteoarthritis patients in the OPD. **Sample:** The osteoarthritis patients attending regularly to the OPD of selected Hospitals, in Bangalore will be the samples for the study. **Sampling Technique:** Non-Probability, Purposive Sampling technique. **Sample Size:** The sample size will be 60 (30 in Experimental and 30 in Control group) osteoarthritis patients regularly attending OPD of selected hospitals, in Nellore.

Sampling Criteria

Inclusion criteria: Osteoarthritis patients, 1. Age group between 35-55 years. 2. Those who are willing to participate in study. 3. Able to speak or to understand Telugu or English. 4. Who can able to do Reflexology by themselves.

Data Collection Tool

Section I: Demographic and selected Baseline Variables. **Section II:** Visual Analogue Scale (VAS) will be used to assess the level of pain among Osteoarthritis patients.

Data Collection Procedure

Prior to the data collection period, the investigator will obtain written permission from concerned authorities of the selected hospitals at Nellore. Then the subjects will be identified according to the inclusion and exclusion criteria by purposive sampling technique and assigned in to either experimental and control group by flipping a coin. After initial rapport established, the purpose of the study will be explained to the study participants and informed consent will be obtained.

The Demographic and selected baseline variables data and pre test pain level will be assessed before intervention in both experimental and Control group by using data collection tool. Then the intervention (that is the Reflexology) will be administered by the investigator for 5 days only to the experimental group. The intervention will be given minimum 3 hours after the administration of analgesics, by the investigator 30 minutes duration 15 minutes for each foot. The post test pain level will be assessed after 5 days of intervention in both Experimental and Control group by the investigator herself. At the end of the Foot Reflexology Procedure the investigator will distribute Pamphlets' regarding foot reflexology to all the study participants in experimental group for further follow up.

Data Analysis Methods

The investigator Planned to do data analysis by using both the Descriptive and Inferential Statistics. **Descriptive statistics:** Mean, Mean Percentage, Standard deviation will be used to explain about the Demographic, selected baseline variables and the pain level. **Inferential statistics:** Chi-Square test, 't' test will be used to find out the association or relationship between the demographic, selected baseline variables and pre test post test pain level. The findings will be presented in the form of graphs, figures and tables.

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